

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|--------|----------|
| FEE DETERMINATION | <i>mt</i> | | 05/07/01 |
| O.I.P.E. CLASSIFIER | | 49 | 5/25/01 |
| FORMALITY REVIEW | H-T | 913 | 06/28/01 |
| RESPONSE FORMALITY REVIEW | <i>lt</i> | 907 | 10/8/01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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Handwritten signature and date: 10/09/01